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TYPE OR PRINT ALL INFORMATION

Exhibitor Name		E-mail Address		Exhibitor Number (Assigned by Fair)							
Address		City		State		Zip		F a i r  U s e O n l y			
Daytime Phone Number		Evening Phone Number		Cell/Mobile Number		Received By:					
Dept No.	Class No.	Mark Age Group Entry A E I S				Entry – Use description specified in hand book			Tag No.	Placing	Amount Paid
<b>Total Premiums</b>											

Please accept for exhibition at the Baldwin County fair the entries described above. I herby certify that exhibits are in accordance with premium lists and understand that the rules set forth in the premium book will govern exhibition of same.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_